# USAID/Ethiopia ANNUAL REPORT FY 2003

3/13/2003

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## A. Program Level Narrative

# **Program Performance Summary:**

Background: The United Nations Development Program Human Development Index ranks Ethiopia as the fifth poorest country in the world. Life expectancy at birth is 43 years, infant mortality is 117 per 1,000 live births, the HIV prevalence rate is 6.6%, and overall literacy is 34%. Ethiopia's current population of 69 million is growing at a rate of 2.7% per year, and will reach 90 million by 2015. Such population growth, in the absence of significant economic growth, exerts a heavy burden on the state to increase service delivery for health and education in particular. At the same time, poor agricultural production growth rates, estimated at 2.4%, widen the gap between food consumption and availability -- a major problem in a country reliant on rainfed agriculture, and one factor explaining Ethiopia's persistent food insecurity. Thus, even in normal years, 4-5 million people require food aid.

Agriculture accounts for half of Ethiopia's GDP, 85% of its exports, and 80% of its total employment. A combination of frequent drought, poor cultivation practices, and low levels of on-farm investment persistently undermine the productivity of the agricultural sector. Ethiopia is overly reliant on coffee for export. In 2000, coffee exports were \$175 million, down from \$265 million in 1999. This has the potential to destabilize the economy, and undermine the implementation of the country's Sustainable Development and Poverty Reduction Program (SDPRP). Levels of trade and investment are low due to policy barriers, weak industries that are not competitive in the international market, and a nascent private sector.

Due to a combination of poor and untimely short and long rains in 2002 and high incidences of poverty, 11.3 million people will require emergency assistance throughout 2003. This follows on the back of the crisis of 1999/2000, from which people have barely had time to recover lost assets. A further 2.9 million are under close monitoring. Experience to date suggests that this will translate into actual relief needs by mid-2003. Agricultural production is estimated at 25% below the last five year average - the lowest per capita production since 1992, and less than 1984-85. As a consequence, malnutrition rates are rising dramatically and the incidence of Global Acute Malnutrition (GAM) is above 15% in many areas of Afar, Amhara and Oromiya. Terms of trade are also declining for those reliant on the market to meet food needs. In November 2002, prices in Addis Ababa were 10-20% above average, and 10-15% above average in secondary markets for grains. By contrast, livestock prices have plummeted, significantly affecting the purchasing power of pastoralists.

Policy change has been slow and is urgently needed to create the conditions that will lead to the broad-based economic growth necessary to alleviate chronic food insecurity. However, this trend appears to be changing with the recently approved Sustainable Development and Poverty Reduction Program (SDPRP). In conjunction with the recent Consultative Group the Government of the Federal Republic of Ethiopia (GFDRE) has moved to open dialog in critical areas rearticulating its Rural Development Strategy, endorsing a policy of asset protection, creating a forum for dialog with the private sector, and launching a study on trade and investment. While the proof will be in the implementation, these are sound indications of a changing development climate.

The conflict with Eritrea concluded with negotiations in 2001 and decisions are currently pending with the United Nations Border Demarcation Commission on final demarcation of the border. Although this remains a contentious issue, Ethiopia now enjoys relative political stability, when compared with her neighbors. That said, competition over scarce resources, specifically for pasture and water in pastoral areas this year, is impacting on livelihoods and magnifying the effects of drought. In some cases, this has led to outbreaks of open conflict. While the pastoral areas are not yet fully integrated into the overall political and economic framework of the country, the GFDRE has made significant progress in this regard. A pastoralist strategy has been added to the Food Security Strategy, the SDPRP, and the GFDRE's Rural Development Strategy. Conflict early warning systems are also in place and the GFDRE has recently appointed the Ministry of Federal Affairs to manage pastoral development.

U.S. Interests and Goals: The USG's overall goal in Ethiopia is to promote regional stability in the Horn of Africa which encompasses all other key interest areas. While Ethiopia has concluded a tense peace with

Eritrea, continuing conflicts in Somalia and Sudan, and smaller-scale unrest elsewhere in the region, provide a haven for terrorist organizations, narco-traffickers and other international criminal networks that threaten the security of U.S. interests. Humanitarian emergencies contribute to regional instability. High levels of poverty resulting from low economic development compound the problems of frequent crisis and increase the destitute caseload over time. Therefore, the U.S. also has a strong interest in promoting economic development by increasing household productivity in chronically food-insecure areas and promoting linkages between the household (micro) and the wider economy (macro). Health and population and democracy are other important U.S. interests in Ethiopia. USAID supports U.S. interests in Ethiopia through programs that prevent and mitigate conflict, respond to humanitarian needs, and enhance rural household food security and productivity. USAID's health programs respond to the global threat of HIV/AIDS and address the primary health needs of Ethiopia's population, especially in family planning and reproductive health. The basic education program aims to improve the quality and equity of the system throughout the country to enable the population to fully participate in the economic and democratic development of the country. USAID democracy programs in Ethiopia support the GFDRE's fiscal decentralization to regions and districts bringing decision making closer to citizens. Programs to strengthen civil society and the judiciary are reported on in this period and have had substantial success. However, unless adequate funding becomes available these areas of activity will cease beyond this reporting period.

The U.S. Departments of Agriculture, State, Defense and Treasury, U.S. Bureau of the Census, and The Centers for Disease Control and Prevention are all working together in the delivery of assistance for the achievement of U.S. objectives.

Challenges: The severity of poverty in Ethiopia, the health status of the population, and recurrent emergencies, make development challenging. However, USAID is working to reduce Ethiopia's frequency of crisis by reducing vulnerability to drought. In recognition that the annual provision of emergency assistance can only save lives, and not assets, USAID in partnership with Government and key donors has made significant policy progress in an attempt to reform the emergency system as the major response to chronic food insecurity. A critical component of the effort to save assets and prevent destitution, and thereby also prevent the chronic caseload from growing, is the development of a Transitional Asset Protection System (TAPS) -- a "safety net" to protect households from depleting assets during crisis. This and other program measures are a step in the right direction and are a culmination of a series of food security and food aid policy reforms set forth in an agenda USAID established in collaboration with other key donors.

However, asset protection is simply not enough for development, although it is a platform from which development can take place. Ethiopia needs to implement programs that will build assets and create the conditions that will lead to broad-based economic growth. The recently approved SDPRP process and the newly articulated Rural Development Strategy need to move quickly to implementation if poverty reduction is to be an obtainable goal for Ethiopia. Reducing the country's dependence on rain-fed agriculture and developing a supportive policy environment and infrastructure for economic diversification are critical in this pursuit. While agriculture can be a viable platform for development, the GFDRE in particular needs to make substantial investments in roads to link farmers to markets, small-scale irrigation to reduce vulnerability to drought and increase productivity, develop light industry, especially in food processing, and develop tourism and trade.

USAID has worked collaboratively with the GFDRE and other donors in the development of the SDPRP and will continue to use this as a platform for future reforms. In the context of its development a joint partner review, while endorsing the program found that issues of governance, decentralization, empowerment and democratization, capacity building for governance, poverty analysis, and policy revision remain as key areas for future dialog.

Key Achievements: While the drought has occupied much of USAID's attention in FY 2002, the longerterm development program remains largely on track. In the course of reviewing the portfolio the Mission found that delays in design of its program to implement the 2001-2006 strategy had been experienced and that assumptions on the availability of data had led to delays in finalizing monitoring systems. These issues account for some of the SOs either not meeting their objectives or failing to have the verifiable data to prove their success. These issues have been rectified and the Mission now has in place both the activities and the systems in place to make and measure progress against its objectives. The following is a summary of the key achievements in FY 2002.

Rural Household Production and Productivity Increased (RHPP): In the long-term, USAID aims to reduce chronic food insecurity in Ethiopia, alleviate rural poverty and contribute to sustainable economic development. This SO did not meet its overall performance targets in FY 2002 due in large part to significant delays in the design and start-up of two major food security initiatives. Depressed grain prices and declining coffee prices, the GFDRE's decentralization effort, and the drought had a further negative impact on results achievement. Nevertheless, USAID restructured coffee cooperatives helped small-scale farmers to get higher prices for their product by linking them to specialty coffee markets. Agricultural research and extension activities improved the lives, economic and social status of farmers, particularly women. In FY 2002, 2,300 target farmers (60% female) and 14,800 non-target farmer households (54% women) adopted new agricultural technologies and broke down barriers to women's economic advancement as a result of USAID assistance.

Food Security Policy: Through the leadership of USAID a food security policy agenda was established with multi-donor and senior government participation. All eleven points of the agenda have been addressed and have resulted in the establishment of a senior working group, empowerment of the DPPC, reform of the annual appeal process, and adoption of a transitional asset protection program. Many of these reforms have made addressing the current food security emergency more efficient and transparent.

Improved Family Health: USAID programs have improved the coverage, management and quality of health services in three focus regions: Southern Nations, Nationalities, and Peoples (SNNP), Amhara, and Oromiya. The success of the program is demonstrated by the substantial improvement of health indicators in the three focus regions: immunizations for diphtheria, pertussis and tetanus (DPT3) increased from 35% in 2001 to 37.5% in 2002; and the increase in socially marketed condom sales from 40 million in 2001 to almost 64 million in 2002 (far exceeding the goal of 54 million). Family planning indicators showed there was a 50% increase in the number of new family planning acceptors and couple-years-of-protection indicators. Furthermore, the increase in the GFDRE's recurrent health budget from 43% in FY 2002 to 49% in FY 2002 showed that some progress was made in health care financing.

Quality and Equity in Primary Education Enhanced: USAID made notable progress in improving the quality and equity of primary education in Ethiopia, especially for girls. Building on previous program achievements, which focused on educational improvement in two regions - SNNPR and Tigray, new activities will expand to improve education nationwide. In FY 2002, continued improvement was achieved in increasing the Gross Enrollment Rate (GER) - from 24% in FY 1995 to 61% in FY 2002 with an annual increment of 4% in FY 2002. The gross enrollment rate for girls in Tigray reached 76% in FY 2002 up from 38% in the baseline year (FY 1995), and in the SNNPR it rose to 51% from 17%. However, giving impetus to the rollout of the program, this growth has not yet been seen on a national level where from FY 1995 to FY 2002, the gender gap increased from 9% to 20% with more boys than girls enrolled. By the end of the program (2007) the gross enrollment rate at the primary level is expected to rise to nearly 70%; the survival rate to Grade 5 is targeted to increase to 50% for both boys and girls; and the mean score on standard achievement test for Grade 4 is targeted to rise to 45% from the current 40%. All 19 teacher education institutions in Ethiopia established Staff Development Units and are providing staff training on a wide range of topics, including teaching methodology and educational research methods in order to improve the quality of teaching at the primary school level. Cluster-based in-service teacher training programs in the two target regions were expanded. The cluster program in Tigray and SNNPR supported about 54% and 12% of the schools, respectively. Continuing efforts are also expected to further increase enrollment, improve retention and enhance quality of education. Noting that the percentage of female primary school teachers increased only 5% from 25% in FY 1995 to 31% in FY 2002 the new program will target female teachers with innovative in-service and pre-service methodologies to retain and promote women teachers such as mentoring programs in teacher training institutions.

More Effective Governance and Civil Society Developed: Despite severe resource constraints, the SO showed significant progress in FY 2002. According to Pact's Organizational Capacity Assessment (OCA), as a result of USAID- supported technical assistance and training 24 partner civil society organizations (CSOs) improved their overall capacity by 31% in FY 2002 over the baseline year of FY 1998. Exchanges and learning tours helped the GFDRE to become more understanding and accepting of NGOs' roles in society. As a result, the Ministry of Justice invited USAID's partner, Pact, and three Ethiopian NGOs to comment on the GFDRE's draft NGO law. These NGOs suggested amendments to the draft law. The GFDRE accepted 90% of the suggested amendments, and incorporated them into the present draft law. USAID-supported NGOs provided comments and input into the GFDRE's Poverty Reduction Strategy Process. USAID training and technical assistance also helped the GFDRE's budget met international accounting standards. This helped the GFDRE to meet international donor demands for greater transparency. The new accounting system will enable the GFDRE to keep more accurate accounts and expedite the accounts resolution process that went into effect at the federal level on July 8, 2002; and make it easier for the GFDRE to computerize its accounting over the next FY.

Mitigate the Effects of Disaster (MED): In FY 2002, the Mission managed 314,000 metric tons (MT) of food valued at more than US\$110 million to meet emergency, transition and development needs in Ethiopia. US\$3.7 million was used to address critical non-food needs such as nutritional assessments. early warning programs and the purchase of short-season crop seeds. The FY 2002 USG emergency food contribution constituted 73% of the total food aid delivered to Ethiopia through the World Food Program. USAID helped to resettle 110,000 Internally Displaced Persons (IDPs) in Eastern Tigray, helping to construct 143 houses and providing 7,400 households with sets of household utensils. USAID also provided assistance to 7,100 IDPs in the form of agricultural rehabilitation inputs, mainly oxen and seeds to restore productivity and livelihoods, and constructed water wells that provided over 4,200 IDPs close access to an improved water supply. Using Title II resources, USAID helped to diversify income and increase savings rates in target areas. In FY 2002, 37,800 people in target areas held approximately \$2.3 million in personal savings accounts with the Dedebit Credit and Savings Institution (DECSI). This is a 23% increase over the previous year in the number of people with personal savings. This increase directly correlates with increases in household income generated mostly from the sale of horticulture, butter, eggs and other cash-earning food products through programs by USAID's Title II development partners. The Title II program also increased the proportion of households using protected water sources. In target Title II program areas, 74% of households now have protected water sources, which has contributed to the reduction of the prevalence of diarrheal diseases to 6.2%, nearly reaching the target of 6%, and significantly lower than the baseline value of 13%. The Community-Based Health Center (CBHC) program helped to fully immunize 4,500 under two-year old children, leading to an increased Expanded Program Immunization (EPI) coverage of 89% in CBHC program sites.

Southern Tier Initiative (STI): USAID assistance under this program has benefited approximately 78,000 pastoralist and agro-pastoralist households in the least developed parts of the country - Somali Region and the Borana Zone of Oromiya. Overall, STI did not meet targets in FY 2002 due to administrative delays. The Special Objective (SpO) Grant Agreement with the GFDRE was not signed until late in FY 2001, and delays in bringing on program staff hindered start-up and implementation. Nevertheless, as a result of USAID assistance, 510,000 pastoralists and agro-pastoralists living in eleven districts of southern Ethiopia have access to immunization and vaccination programs to protect their children and their livestock. Thirty-nine community animal health workers vaccinated and treated over 174,000 animals. laying the foundation for fee-based sustainable Community Animal Health Workers. The USAID program helped establish 22 women's saving and credit groups and trained women to manufacture and use improved milk processing equipment. An expanded program of immunization reached 1,077 children under 12 months, exceeding the target of 1,033. Enrollment in eight basic education centers and nine satellite schools more than doubled from 506 to 1,264, exceeding the target of 1,120. USAID trained over 4,000 people to serve as peace negotiators in governance and legal literacy. Of 84 reported disputes, 80 were peacefully resolved as a result of the program training in traditional and alternative means for resolving disputes.

USAID intends to expand and build upon these programs, and with a new five-year cooperative agreement in place and activities underway it expects to make significant progress towards results under the SpO in FY 2003.

**Environmental Compliance:** The Mission reviewed all strategic objectives and determined that all current activities are in compliance with approved Initial Environmental Examinations (IEEs), Environmental Assessments, and Categorical Exclusions and all required mitigations and conditions are being followed.

Plans for new or amended Initial Environmental Examinations or Environmental Assessments.

663-007:	Winrock EMPOWER Cooperative Agreement (Amended IEE in April
	2003).
663-007:	VOCA/ACE. (Amended IEE in April 2003).
663-007:	R2D (Amended IEE in April 2003.)
663-007:	AMAREW (Environmental Status Report (ESR) in May 2003)
663-008:	High Risk Corridor Activity (Amended IEE in April 2003)
663-008:	Family Planning/Reproductive Health (New IEE in January 2003).
663-011:	Title II ESRs prior to beginning new activities.
663-011:	Save the Children/USA (Amended IEE in FY 2003).
663-011:	Title II Cooperating Sponsors planning to promote, handle or use
	pesticides (Amended IEE in April 2003).
663-011:	Relief Society of Tigray (REST) for fumigation of infested relief food
	(Amended IEE in January 2003).
663-011:	AFRICARE updated Environmental Screening Form (ESF) and ESR for
	road construction (FY 2003).

# **Country Closeout & Graduation:**

# D. Results Framework

663-001 Increased availability of selected domestically produced food grains

Discussion:

663-002 Increased use of primary and preventive health care services

Discussion:

663-003 Quality and equity improved in an expanded system of primary education

Discussion:

663-004 Increased access to and participation in a democratic system

Discussion:

663-005 Enhanced household food security in target areas

Discussion:

# 663-007 Rural Household Production and Productivity Increased

- IR 7.1 Integration of food, livestock and factor markets increased
- IR 7.2 Competition in agricultural and output markets increased

- IR 7.3 Rural household cash income increased/diversified
- IR 7.4 Food, agriculture and environmental research systems in target areas strengthened
- IR 7.5 Dissemination of food, agriculture and environmental technology information in target areas improved

#### Discussion:

## 663-008 Improved Family Health

- IR 8.1 Increased use of high impact child survival interventions, including nutrition
- IR 8.2 Increased use high impact reproductive health interventions, including maternal nutrition in focus regions and target areas nationwide
  - IR 8.3 Reduced impact of HIV/AIDS and tuberculosis
  - IR 8.4 Increased health sector resources and improved systems in focus regions

#### Discussion:

# 663-009 Quality and Equity in Primary Education System Enhanced

- IR 9.1 Quality of professional education personnel enhanced
- IR 9.2 Teacher-learner support systems strengthened
- IR 9.3 Community-government partnerships in education strengthened
- IR 9.4 Systems for managing personnel, instructional materials, and monitoring and evaluation strengthened and used

#### Discussion:

## 663-010 More Effective Governance and Civil Society Developed

- IR 10.1 Civil society participation increased
- IR 10.2 Judiciary and respect for human rights strengthened
- IR 10.3 Public financial resources used more effectively

### Discussion:

## 663-011 Mitigate the Effects of Disaster

- IR 11.1 Increased adoption of disaster preparedness measures
- IR 11.2 Targeted, timely and appropriate disaster response
- IR 11.3 Peace/stability in selected dispute affected areas promoted
- IR 11.4 Capacity of most vulnerable populations to make the transition to development improved

**Discussion:** In the Integrated Strategic Plan, IR 3 was worded narrowly to reflect the expected results of the Border Development Program. However, it has become apparent that dispute is one of the key issues in disaster mitigation. Dispute can be both the cause of disaster (including non-combatant disaster) -- through displacement of people, destruction of livelihoods, etc. -- as well as the result of disaster when stressed populations are competing for scarce resources.

Incorporation of IR 4: Since the development of the ISP in mid-2000, the Mission and the MED SO have undertaken a number of analyses and studies which reinforce the need to integrate development programs to improve household livelihoods and economies with food assistance. Based on the emphasis in these studies on the vital role of development in longer-term mitigation of disaster, a fourth IR is added to MED SO's Results Framework -- one which will better capture the program's efforts in Title II integration for medium to long-term development.

## 663-012 Improved Livelihoods for Pastoralists and Agro-Pastoralists in Southern Ethiopia

- IR 12.1 Pastoralist and agro-pastoralist incomes increased
- IR 12.2 Increased adoption of family health practices
- IR 12.3 Access to appropriate basic education increased
- IR 12.4 Traditional dispute resolution mechanisms enhanced

**Discussion:** IR 12.2: The Mission changed the wording of the initial IR 12.2 statement in the Integrated Strategic Plan because it did not totally reflect the initiatives to be implemented. The new wording of the IR more accurately captures the majority of basic family health issues being addressed. The activities include not only maternal, child health and nutrition but also family planning, HIV/AIDS awareness creation and training of health care providers.

IR 12.4: The word "effectiveness" was found to be redundant and hence dropped.

Indicator (all data should pertain to FY or CY 02)	OU Response		Significant Result: Description of the significant result for a strategic objective	Data Quality Factors: Information relevant to the collection of this indicator data, e.g. "this data was not collected last year because it is only collected every five years."
			lar I: Global Development Alliance	
Did your operating unit achieve a significant	result working in	alliance with the	he private sector or NGOs?	
663-009 Quality and Equity in Primary Education System Enhanced	Yes		Five public-private partnerships have been formed since FY 2000. These alliances have leveraged more than \$6 million for USAID programs. In FY 2002, this SO initiated two new alliances that have leveraged more than \$3.6 million over the next five years period. The alliances were with George Washington University, leveraging \$3.049 million over five years period to support Ethiopian teacher training institutions, and with Opportunities Industrialization Centers International, leveraging \$594,000 for two years to establish innovative community based academic and computer learning centers.	USAID data, reliable.
663-010 More Effective Governance and Civil Society Developed	Yes		In FY 2002, an alliance was formed with Irish Aid, leveraging \$1,026,858 to support the USAID's successful Decentralization Support Activity. This partnership is helping the program expand from on regional state in the south to two others in the north.	USAID data, reliable.
a. How many alliances did you implement in 2002? (list partners)	5			1) Bank of Abyssinia & ACDI/VOCA; 2) University of Alabama & Mekelle University; 3) George Washington University and Ethiopian teacher training institutions (leveraging \$ 3.049 million for five years); 4) OICI (Opportunities Industrialization Centers International) leveraged \$ 594,000 for two years to establish innovative community based academic and computer learning centers; and 5) Irish Aid for Decentralization Support Activity Euro 1,010,820 (about \$1,059,474)
b. How many alliances do you plan to implement in FY 2003?	5			
What amount of funds has been leveraged by the alliances in relationship to USAID's contribution?	6102474			Agreement documents.
		Pillar II: E	conomic Growth, Agriculture and Trade	

#### USAID Objective 2: More rapid and enhanced agricultural development and food security encouraged

Did your program achieve a significant result in the past year that is likely to contribute to this objective?

663-007 Rural Household Production and Productivity Increased

No

This SO did not meet its overall performance targets in FY 2002. This was due to delays in the design and start-up of two major food security initiatives. With these two key programs now in place, the mission expects to meet the targets for this SO in FY 2003. Despite this, many elements of the SO performed well, meeting or exceeding their targets activity.

USAID Objective 3: Access to economic opportunity for the rural and urban poor expanded and made more equitable

Did your program achieve a significant result in the past year that is likely to contribute to this objective?

USAID Objective 4: Access to quality basic education for under-served populations, especially for girls and women, expanded Did your program achieve a significant result in the past year that is likely to contribute to this objective? Data reflect the achievements made in advancing access in education in the two regions -- Tigray Primary school Gross Enrollment Rate (GER) has and the Southern Nations, Nationalities and significantly increased from 24.1% in FY 1995 to 663-009 Quality and Equity in Primary People's Region (SNNPR). Valid and reliable data Yes 61.6% in FY 2002. In FY 2002, the growth rate of **Education System Enhanced** from the "Education Statistics Abstract", August the GER was 4.2%. The GER exceeded the target 2002, generated through USAID assisted for the year (60%) by 1.6 percentage points. **Educational Management Information Systems** (EMIS). The formula used to set targets for the 2002 FY is: all children enrolled (i.e. 100% enrollment) in Grades 1-8, government and non-government schools, in Tigray region PLUS all children enrolled in Grades 1-8, government and non-government a. Number of children enrolled in primary 817.942 615.322 .433.264 schools, in 20% of schools in SNNP region and schools affected by USAID basic education Male Female Total 10% of schools in Amhara and Oromia regions programs (2002 actual) (i.e. % of projected gross enrollment) PLUS Southern Tier Initiative (STI) education activities in Somali region. Data from EMIS "Education Statistics Abstract", August 2002, and CGPP and STI partners' data, reliable. The targets for 2003 are all children enrolled in government primary schools in the country. The Community Government Partnership Program, the in-service and pre-service teacher training b. Number of children enrolled in primary programs and media and material support 4.800.000 3.400.000 8.200.000 schools affected by USAID basic education programs are the major activities from which the Male Female Total programs (2003 target) schools will benefit. To implement the in-service and pre-service teacher- training programs, BESO Il will be working in all teacher education institutions. Therefore, all government schools will benefit, in one way or another, from the program.

USAID Objective 5: World's environment protected by emphasizing policies and practices ensuring environmentally sound and efficient energy use, sustainable urbanization,

Did your program achieve a significant result	t in the past	year that is	s likely to co	ontribute to this objective?	-
a. Hectares under Approved Management					
Plans (2002 actual)					
b. Hectares under Approved Management					
Plans (2003 target)				Pillar III: Global Health	
		USAID O	biective 1: F	Reducing the number of unintended pregnancies	
Did your program achieve a significant resul	t in the past		-		
663-008 Improved Family Health	N/A	your mark			
Percentage of in-union women age 15-49 using, or whose partner is using, a modern method of contraception at the time of the survey. (DHS/RHS)	6.3%				National level data from DHS, 2000 (available in 2001), reliable. No data available for this year. Project level data will be available in 2003. The DHS will provide national level data in 2005.
		U:	SAID Objec	tive 2: Reducing infant and child mortality	
Did your program achieve a significant result	t in the past	year that is	s likely to co	ontribute to this objective?	_
663-008 Improved Family Health	Yes			Immunization rates for diphtheria, pertussis and tetanus (DPT3) increased from 32% in 2001 to 37.5% in 2002. The achievement exceeded the 35% target set for the year.	Ministry of Health data for the target SNNP region.
Percentage of children age 12 months or less who have received their third dose of DPT (DHS/RHS)	Male	Female	Total		No gender disagregated data available. For SNNP target region, 37.5% of children received their third dose of DPT in 2002. Ministry of Health service data.
Percentage of children age 6-59 months who had a case of diarrhea in the last two weeks and received ORT (DHS/RHS)	43.3 Male	46.6 Female	Total		National level data from DHS, 2000 (available in 2001), reliable. No data available for this fiscal year.
Percentage of children age 6-59 months receiving a vitamin A supplement during the last six months (DHS/RHS)	Male	Female	Total		No gender disagregated data available. For both sexes the percentage is 26% for 2002. Data refers to five of nine regions. No data available for the smaller regions: Gambella, Benshangul, Somalie and Afar. Facility based Ministry of Health data.Campaign approach is planned for FY 2003.
Were there any confirmed cases of wild- strain polio transmission in your country?	No				No wild polio virus has been detected since January 2001. The detection of acute flaccid paralysis (AFP) in children under 15 improved. Largely due to a heavy USAID investment in polio eradication, there has been a significant improvement in the non-polio AFP rate from 0.74 in FY 01 to 1.44 in FY 02.
USAID Obj	ective 3: Re	educing dea	aths and ad	verse health outcomes to women as a result of preg	nancy and childbirth
Did your program achieve a significant result	t in the past	year that is	s likely to co	ontribute to this objective?	
663-008 Improved Family Health	N/A				-
Percentage of births attended by medically-trained personnel (DHS/RHS)	9.7%				National level data from DHS, 2000 (available in 2001), reliable. No data available this year.

USAID Ob	jective 4: R	educing the	HIV transn	nission rate and the impact of HIV/AIDS pandemic in	developing countries
Did your program achieve a significant result	It in the pas	t year that is	s likely to c	ontribute to this objective?	
663-008 Improved Family Health	Yes			Significant result was achieved in sales of socially marketed condoms which exceeded the target of 55.5 million by about 15%. The sales figure for FY 2002 also exceeded the previous year's sales by over 9 million condoms.	Data is for USAID target areas, from Pathfinder
a. Total condom sales (2002 actual)	63779597				Data for USAID target areas, from Pathfinder and PSI/DKT. Reliable.
b. Total condom sales (2003 target)	70000000				
National HIV Seroprevalence Rates reported annually (Source: National Sentinel Surveillance System)	6.6%				Data is from USAID sponsored "Aids in Ethiopia - Fourth Edition" survey report (2002). The national adult HIV prevalence rate of 6.6% is less than the prevalence rate of 7.3% reported last year (Country Overview for the CBJ). It is to be noted that this change in national HIV prevalence does not imply that the HIV epidemic in Ethiopia is declining. The current estimate is a combination of possible stabilization of the epidemic and a change in data collection and analysis process (a result of more extensive surveillance data and the reclassification of a previously rural area as an urban site). Additional rural sites will be included in FY 2003.
Number of sex partners in past year (Source: national survey/conducted every 3-5 years)per DHS or other survey)	5.3				Data from Behavioral Surveillance Survey (BSS, 2002) for out of school youth (15-24 years). Reliable.
Median age at first sex among young men and women (age of sexual debut) ages 15 24 (Source: national survey/conducted every 3-5 years) per DHS or other survey)	0 Male	0 Female	0 Total		BSS analytical report not yet available.
Condom use with last non-regular partner (Source: national survey/conducted every 3-5 years)per DHS or other survey)	56%				National level data from Behavioral Surveillance Survey (BSS, 2002) for out of school youth (15-24 years). Reliable.
Number of Clients provided services at STI clinics	5609				Pathfinder project data.
Number of STI clinics with USAID assistance	15				
Number of orphans and other vulnerable children receiving care/support	22182				Pact's program provided care/support for 21,632 orphans and vulnerable children for various reasons while CRS's program provided assistance for 550 HIV/AIDS orphans.
Number of Orphans and Vulnerable Children programs with USAID assistance	7				

				_
Number of community initiatives or community organizations receiving support to care for orphans and other vulnerable children	7			
Number of USAID-supported health facilities offering PMTCT services	0			No PMTCT programs
Number of women who attended PMTCT sites for a new pregnancy in the past 12 months  Number of women with known HIV infection among those seen at PMTCT sites within the past year.	0			
within the past year.  Number of HIV-positive women attending antenatal clinics receiving a complete course of ARV therapy to prevent MTCT (UNGASS National Programme & Behavior Indicator #4)				
Number of individuals reached by community and home-based care programs in the past 12 months	812			Pathfinder data. Reliable.
Number of USAID-assisted community and home-based care programs	7			Pathfinder (6) and Pact (1) programs. USAID monitoring, reliable.
Number of clients seen at Voluntary Counseling and Testing (VCT) centers	926			526 men and 400 women VCT clients. Pact project data, with USAID spot checking. Reliable.
Number of VCT centers with USAID assistance	21			20 (FHI) and 1 (Pact) centers. Activity to expand in FY 03. USAID monitoring.
Number of HIV-infected persons receiving Anti-Retroviral (ARV) treatment	0			No ARV programs.
Number of USAID-assisted ARV treatment program	0			
a. Number of individuals treated in STI programs (2002 actual)	0 Male	0 Female	0 Total	No gender disagregated data available. A total of 5,609 individual treated in STI programs. Pathfinder data.
b. Number of individuals treated in STI programs (2003 target)	6,000 Male	6,508 Female	12,508 Total	The target for both sexes is 12,508 individuals.
a. Is your operating unit supporting an MTCT program?	No			
b. Will your operating unit start an MTCT program in 2003?	Yes			Start-up activities with existing partners planned.
<ul> <li>a. Number of individuals reached by community and home based care programs (2002 actual)</li> </ul>	357 Male	455 Female	812 Total	Pathfinder data, with USAID spot checking. Reliable.
<ul> <li>b. Number of individuals reached by community and home based care programs (2003 target)</li> </ul>	1,078 Male	1,372 Female	2,450 Total	
Number of orphans and vulnerable children reached (2002 actual)	7,937 Male	7,254 Female	15,191 Total	A total of 15,191 children were reached in FY 2002. Pact project data.

b. Number of orphans and vulnerable children reached (2003 target)	0 Male	0 Female	0 Total						
a. Number of individuals reached by antiretroviral (ARV) treatment programs (2002 actual)	0 Male	0 Female	0 Total		No ARV treatment programs.				
b. Number of individuals reached by antiretroviral (ARV) treatment programs (2003 target)	11,000 Male	11,000 Female	22,000 Total						
USAID Objective 5: Reducing the threat of infectious diseases of major public health importance									
Did your program achieve a significant resul	t in the pas	t year that is	s likely to c	ontribute to this objective?					
663-008 Improved Family Health									
a. Number of insecticide impregnated bednets sold (Malaria) (2002 actual)	0								
b. Number of insecticide impregnated bednets sold (Malaria) (2003 target)	0								
a. Proportion of districts implementing the DOTS Tuberculosis strategy (2002 actual)	86%				USAID assistance to TB will start in FY 2003. The percentage establishes a baseline for USAID activity. The proportion of districts implementing DOTS decreased from the 91.4% level reported last year because of the new administrative restructuring which increased the number of districts from 550 to 605. Ministry of Health data with WHO review. Reliable.				
b. Proportion of districts implementing the DOTS Tuberculosis strategy (2003 target)	90%								
	Pillar IIII: Democracy, Conflict and Humanitarian Assistance								
	U	ISAID Obje	ctive 1: Stre	engthen the rule of law and respect for human rights					
Did your program achieve a significant resul	t in the pas	t year that is	s likely to c	ontribute to this objective?					
663-010 More Effective Governance and Civil Society Developed	N/A								
	ι	JSAID Obje	ctive 2: End	courage credible and competitive political processes					
Did your program achieve a significant resul		,		<u> </u>					
	U	SAID Object	tive 3: Pror	mote the development of politically active civil society					
Did your program achieve a significant resul	t in the pas	t year that is	s likely to c	ontribute to this objective?					
663-010 More Effective Governance and Civil Society Developed	Yes			A second round of Organizational Capacity Assessments (OCA) conducted on 24 USAID- supported NGOs showed that, collectively, these organizations have improved their capacity by 31.8% in FY 2002 over the baseline of FY 1998.					
	USAID (	Objective 4:	Encourage	more transparent and accountable government insti	tutions				

Did your program achieve a significant result in the past year that is likely to contribute to this objective?

663-010 More Effective Governance and Civil Society Developed	Yes		LIC TO	With USAID assistance, the GFDRE's FY 2002 budget met international accounting standards for the first time ever, appropriately identifying budgetary units and cost centers. USAID trained federal government officials (27 treasury officials, 87 internal auditors, and 850 accountants); and assisted 140 public bodies' initiating the new system.	Data from the contractor Harvard Institute of International Development. Reliable.			
USAID Objective 5: Mitigate conflict  Did your program in a pre-conflict situation achieve a significant result in the past year that is likely to contribute to this objective?								
663-011 Mitigate the Effects of Disaster	Yes	gillicant re	Suit III III e p	To restore productivity and livelihoods, in FY 2002, the Ethio-Eritrean Border Development program constructed 143 houses, provided 7,362 households with sets of household utensils, provided cash assistance to 7,076 IDPs in both woredas for the purchase of agricultural rehabilitation inputs, mainly oxen and seeds. The program also constructed 6 water wells that provide over 4,200 IDPs close access to an improved quality water supply.	Partners report with USAID monitoring. Reliable.			
663-012 Improved Livelihoods for Pastoralists and Agro-Pastoralists in Southern Ethiopia	N/A			In the program to improve the livelihoods of pastoralists, USAID trained 4,069 people based on their potential to serve as peace negotiators, in governance and legal literacy. Of 84 disputes reported in this region, 80 were peacefully resolved.	Data from Save the Children/ USA with USAID spotchecking.			
Did your program in a post-conflict situation	Did your program in a post-conflict situation achieve a significant result in the past year that is likely to contribute to this objective?							
Number of refugees and internally displaced persons assisted by USAID	0 Male	0 Female	0 Total		In FY 2002, a total of 110,000 IDPs received assistance from USAID.No gender disaggregated data available. Data on IDPs from USG reporting on northern border with Eritrea, 2002. Data represent USG compilation of best estimates of United Nations peacekeepers, NGO partners, GOE and humanitarian agencies working in border zone.			
USAID Objective 6: Provide humanitarian relief								

Did your program achieve a significant result in the past year that is likely to contribute to this objective?

663-011 Mitigate the Effects of Disaster	Yes			75% of households in target areas now have protected water sources. This is a 69% increase over FY 2001 performance and exceeds the 26% baseline rate. These helped to reduce the prevalence of diarrheal diseases in target areas. In FY 2002, the prevalence rate of 6.8% nearly reached the target of 6%, and was significantly lower than the baseline value of 13%. In 2002, the USG, through USAID, has provided 327,900 metric tons (MT) of food, valued at more than US\$126 million, to meet emergency, transition and development needs in Ethiopia. An additional US\$3.4 million for critical non-food needs such as nutritional assessments, early warning and the purchase of short-season crop seeds. This contribution constituted 73% of the total food aid that the World Food Programme (WFP) delivered to Ethiopia.
Number of beneficiaries	1000000			
Crude mortality rates	%			
Child malnutrition rates	%			
Did you provide support to torture				
survivors this year, even as part of a larger effort?				
Number of beneficiaries (adults age 15 and over)	Male	Female	Total	
Number of beneficiaries (children under age 15)	Male	Female	Total	

Title II partners data based on small scale sample surveys (1% of the population) for prevalance rate of diarrheal diseases.